

CHILD SEXUAL EXPLOITATION PREVENTION EDUCATION

A RAPID EVIDENCE ASSESSMENT

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Appendix 1: scope, research questions, exclusion/inclusion criteria, search strategy, limitations and bibliography

INTRODUCTION

With their ability to reach the largest number of children and young people, schools have the potential to play an invaluable role in preventative education (Beckett et al 2013; The Education and Training Inspectorate 2014). However, while UK safeguarding policies recognise the unique position of schools and other educational settings in delivering prevention programmes to a 'captive audience' (OFSTED 2012; The Education and Training Inspectorate 2014), relatively little is known about what makes such work effective (Topping and Barron 2009).

This briefing is based on a rapid assessment of the available evidence relevant to CSE prevention education. It brings together key messages from research and evaluation about what works to prevent sexual exploitation and promote healthy relationships. As specific evidence is limited, it also incorporates some messages from other kinds of prevention work in educational settings. It explores what successful interventions might look like, how they should be delivered, and what impact such interventions might be expected to achieve.

KEY MESSAGES:

- A **whole school approach**, integrating CSE prevention across the curriculum, is shown to be an effective model for school-based prevention. Schools should adopt a '**zero-tolerance**' **culture** and respond appropriately to peer on peer sexual harassment in schools.
- **Longer-term, more intensive** interventions achieve higher impact. Although there is no consistent message about the ideal duration, weekly hour-long sessions over several months e.g. as part of PSHE education, promises better and more sustainable outcomes than one-off sessions.
- Young people's **participation in the development/delivery of interventions** adds authenticity, credibility and acceptability, which are key factors for impact.
- Interventions should be based on an **assessment of need** and be **tailored** to the specific audience and local context, in which they are delivered. They should include a range of **different activities** that engage young people and cater for different learning styles.
- **High risk children and young people** need additional resources and **targeted support**; links between particular vulnerabilities and CSE need to be recognised and incorporated into targeted responses. Clear referral and support pathways are required for high risk children and young people.
- Evaluations of school-based prevention programmes in related fields show **mixed results**. Even high intensity, well-designed programmes have shown **little impact on young people's actual behaviour** although they can **build confidence, increase knowledge** and **change some attitudes that may legitimise harmful behaviours**.

WHAT CAN EVALUATIONS TELL US?

In the UK, the evaluation of school-based abuse prevention or 'healthy relationship' intervention programmes is in its infancy. This review therefore draws on research from other countries, particularly the US and Canada, where school-based prevention work has been evaluated more rigorously. It also draws on evaluations of other types of prevention work (e.g. teenage pregnancy, youth offending or drug prevention programmes). While lessons from other countries, or related to other kinds of prevention work, may not be directly transferable, they do provide some useful indications of what makes some interventions more successful than others.

Creating interventions to change sexual behaviour and relationship norms is challenging - as these are underpinned by social norms, attitudes and behaviours that reflect engrained gender and other inequalities in our societies. Many interventions aim to involve participants in critical reflection in order to facilitate changes in perceptions and attitudes, which it is hoped may translate into behavioural changes (Fox et al 2016). While school-based programmes in North America have demonstrated behavioural change, evaluations of UK interventions are comparatively few; they tend to be small scale, are not always well designed and **rarely assess behavioural change** (Fox et al 2014). Instead, most UK studies **focus on knowledge** and **attitudinal change** and assess how much information young people retain (Gadd et al 2014).

WHAT ARE THE DIFFERENT MODELS OF PREVENTION?

There are two main models of prevention: **universal** and **targeted**.

Universal prevention

Universal prevention is directed at a whole population. School-based intervention is a popular model for universal prevention in the UK. Since most children and young people attend school, school-based prevention programmes can reach large numbers of pupils. School-based interventions are often assumed to be the most cost effective model (Topping and Barron 2009).

Due to resource constraints and competing curricular priorities, school-based programmes are often short-term or one-off interventions, which can undermine their effectiveness and the sustainability of outcomes (Humphreys et al 2008). At the same time, evidence suggests that a **'whole school' approach** that integrates and promotes preventative messages across all aspects of school life is most likely to achieve positive change (Beckett et al 2013). Embedding healthy relationship education in the curriculum, e.g. as part of Personal, Social, Health and Economic (PSHE) education, is recognised to bring positive results, particularly when programmes are long-term (Hale et al 2011).

Targeted prevention

Targeted prevention is directed at children and young people with a higher than average risk of being abused or who have already experienced abuse. There is evidence to suggest that young

people who drop out of school run away, go missing and those who have been excluded from mainstream education are more likely to be vulnerable to sexual exploitation (Scott and Skidmore 2006) and these groups may need **additional, targeted support**. School prevention programmes miss some of the most vulnerable children and young people, including those in Pupil Referral Units (PRUs) or in initial accommodation for asylum-seekers. Training education and social care professionals to recognise the signs of CSE is an important step in prevention and support strategies for particularly vulnerable children and young people at the margins of mainstream education. However, there is little research on targeted intervention models or their effectiveness in alternative educational settings. This briefing is therefore based largely on findings from universal interventions.

HOW EFFECTIVE IS SCHOOL-BASED PREVENTION IN GENERAL?

Overall, many evaluations of school-based prevention programmes have found **limited impact** on outcomes (Topping and Barron 2009; NatCen 2012; SPHSU).

The SHARE Sex School Education Trial

One of the largest-scale evaluations of a school based risk prevention programme in the UK, the *SHARE Sex School Education Trial*, found very limited impact. The evaluation looked at whether a specially designed, theoretically-informed, school sex education programme¹ had any effect on young people's sexual risk-taking behaviour and the quality of their sexual relationships. *SHARE* aims to teach young people to establish and maintain safe boundaries in intimate relationships, and to take precautions if they have sexual intercourse.

The evaluation of *SHARE* mainly measured impact on exposure to unsafe sex. As well as looking at young people's practical sexual health knowledge, the evaluation assessed whether young people used contraception; whether they regretted sexual encounters; and whether they experienced any pressures in sexual encounters. The findings showed increased practical sexual health knowledge and a slightly improved quality of sexual relationships, primarily through reduced regret. However, the programme had only an extremely small, positive effect on four of the outcomes targeted, and found no impact on young people's age of first intercourse, levels of sexual activity, or condom or contraceptive use (Henderson et al, 2007).

School-based child sexual abuse prevention

A systemic review of school-based child sexual abuse prevention programmes, mainly in North America, found mixed results and only small improvements on measured outcomes, which included children and young people's prevention knowledge and skills; self-esteem; risk perception;

¹ The *SHARE* programme is comprised of a five-day teacher-training programme plus a 20-session pack for the 3rd year of secondary school (aged 13-14) and 4th year (aged 14-15). Given timetable constraints, prioritising skills development inevitably excludes other important elements of sex education. *SHARE* is therefore intended as only one part of what should, ideally, be a broader curriculum of sex education starting in primary school (SPHSU).

responses to threat or abuse; and disclosure (Topping and Barron 2009). The review showed that there were small, but significant improvements in children's awareness and knowledge around abuse prevention skills and over a third of the studies reported increased self-esteem. However, there was little evidence that these positive outcomes were maintained and no change was found in children and young people's disclosure. However, a recent review of 24 studies, conducted in the United States, Canada, China, Germany, Spain, Taiwan, and Turkey (Walsh et al 2015) is more positive about the knowledge gained by children and young people from a variety of interventions (ranging from a single 45-minute session to eight 20-minute sessions on consecutive days). There was evidence that school-based sexual abuse prevention programmes were effective in increasing participants' knowledge of how to protect themselves and their knowledge of sexual abuse prevention concepts and possibly increase the likelihood of disclosure.

The evaluation of the Teens and Toddlers programme

Another UK intervention that has been rigorously evaluated using a randomised controlled trial is the *Teens and Toddlers (TandT)* programme (NatCen 2012). *TandT* worked with local authorities to implement the programme through secondary schools with the aim of decreasing teenage pregnancy by raising the aspirations and educational attainment of vulnerable 13 to 17-year-old girls.² The evaluation of *TandT* found no immediate improvements in relation to contraception use; teenage parenthood; or improvement in low youth development scores. There were short term improvements in knowledge of sexual health; and young women had fewer difficulties in discussing the pill with a doctor or in a clinic,³ but these outcomes were not maintained one year after the programme ended. The only positive impact to be sustained was an improvement in the self-esteem of young women in the intervention group.

HOW EFFECTIVE ARE SEXUAL VIOLENCE PREVENTION PROGRAMMES IN PARTICULAR?

There is little robust evidence of school-based interventions actually reducing sexual violence. However, there have been some evaluations of specific programmes that show promising results.

Evidence from 'Relationships without Fear' (RWF)

The REaDAPt evaluation of *Relationships without Fear (RWF)* found that the programme had an impact on changing young people's attitudes to become less accepting of domestic violence (REaDAPt 2012). *RWF* was further evaluated in the study '*From Boys to Young Men*'⁴, which

² Young women complete an 18 to 20 week programme during which they attend weekly three-hour sessions in a nursery setting. Each participant looked after a child for about an hour and a half per session, took part in classroom-based group work, kept a journal of their experience and learning, and had access to a trained counsellor. Participation in the programme enabled the young people to achieve a National Award in Interpersonal Skills, Level 1 (NatCen 2012).

³ 44%, compared with 56% in the control group

⁴ *From Boys to Young Men* measured outcomes through control groups and conducted surveys with more than one thousand young people aged 13-14 about their experiences of domestic abuse.

examined why some boys become domestic violence perpetrators (Fox et al 2013). The study also showed much lower acceptance of domestic violence in both boys and girls after the programme had ended and that these attitudes persisted three months on.

The evaluation of 'Rape Crisis Scotland's Sexual Violence Prevention Project'

The evaluation of Rape Crisis Scotland's Sexual Violence Prevention Projects showed that high quality workshops delivered in schools by independent experts can significantly impact young peoples' knowledge and attitudes on relationships, consent and sexual violence (McNeish and Scott 2015). The evaluation found that:

- Girls' attitudes and confidence around consent can be strengthened
- Boys' understanding of what constitutes healthy relationships can be strengthened
- Young people increased knowledge around consent through workshops

Initiatives often provide scant information on gender differences This evaluation found that, whilst boys started at a lower starting point, the prevention programme had more impact on boys' attitudes towards sexual violence than on girls' (McNeish and Scott 2015).

Barnardo's Preventative Education Programme on CSE delivered both training to frontline professionals and awareness raising for students in educational settings across 25 London boroughs. Evaluation by Barnardo's Policy and Research Unit found impact on the knowledge and understanding of both professionals and young people - with around half of young people having a better understanding of risk factors, ways to keep safe and increased knowledge of support services (Paskell, 2012)

WHAT WORKS?

Overall, the findings from research and evaluation suggests that there are a range of factors that increase the likelihood of interventions having impact. These include:

- A school's readiness and commitment to introduce interventions (Stanley et al 2015)
- An integrated 'whole school' approach that involves active parent engagement and effective local multi-agency working (Beckett et al 2013; Rawden 2015; Humphreys et al 2008)
- A programme based on a needs-assessment and tailored to the specific audience and context (Humphreys et al 2008)
- Duration of the intervention; ideally sustained over months (REaDAPt 2012; Topping and Barron 2009)
- Regular sessions with repeat sessions to sustain impact (Barter and Berridge 2011)
- Content that challenges attitudes around gender and relationships that underpin harmful behaviour (Barter and Berridge 2011)
- Striking a balance between delivering a well-designed and tested programme and flexibility to context and audience (Beckett et al 2013; Hale et al 2011)
- Credibility, acceptability and delivery style of the trainers (Beckett et al 2013)
- Young people's participation (Firmin and Shuker 2016; Stanley et al 2015)
- Choice of methods/activities; catering for different learning styles (Fox et al 2012)

WHAT MAKES SCHOOLS 'READY' TO INTRODUCE CSE PREVENTION?

Schools must to be '**ready**' and committed to introducing and supporting CSE prevention programmes across all aspects of school life in order to achieve impact (Stanley et al 2015). In the face of growing evidence that children and young people experience serious incidents of sexual violence and harassment in schools, adopting a **zero-tolerance school culture** is key for tackling peer on peer sexual violence (Barter and Berridge 2011; Firmin 2015a). Peer on peer abuse in schools makes up a quarter of cases in many areas⁵ (EVAW, 2010). Yet, research found that schools do not always adequately respond to incidents of sexual violence and harassment (Firmin 2015a).

⁵ A significant minority of girls experience sexual violence in schools; 29% of 16 - 18 year old girls report experiencing unwanted touching, and 71% sexual name calling at school (EVAW, 2010).

Young people often highlight a lack of adequate sex and relationship education in schools⁶ (Girlguiding 2015). Without appropriate guidance, young people are left to find out for themselves what is 'normal' and receive unhelpful messages from media or popular culture (Firmin and Shuker 2016). Schools therefore should provide specialist training for teachers and staff as well as high quality, age appropriate education and information to pupils that engages young people and challenges beliefs, perceptions and attitudes that sustain sexual harmful behaviours (Firmin and Shuker 2016; Pearce 2009; Beckett 2013).

WHAT DOES A WHOLE SCHOOL APPROACH LOOK LIKE?

A '**whole school**' approach addressing sexual violence and bullying is generally seen as the most effective model for both primary and secondary schools (Beckett et al 2013). A 'whole school' approach generally includes reviewing relevant school policies (e.g. on bullying, safeguarding, dress and conduct); involving all members of the school community, including pupils, teachers, school support staff, parents/carers, governors; training and awareness raising with all stakeholders and overt messaging about the school's role in preventing sexual violence. A whole school approach relies on all staff having appropriate training in child protection and safeguarding. Specialist projects can support schools by delivering specialist CSE training.

Examples of whole school approaches

Example 1: An example of a successful whole school approach which was designed to promote **positive youth development** is *Raising Healthy Children*, a US-based prevention programme with **teacher, parent, and child components**. *Raising Healthy Children* is designed to improve family bonding with the school while also building children's competencies for resisting risks. The programme starts in primary school and is ideally continued throughout secondary school. It includes:

- Workshops to train teachers to become more skilled and confident in classroom management; pupil motivation, and in promoting pupils' reading, interpersonal and problem-solving skills.
- Parenting group workshops, in-home problem-solving sessions, and regular newsletters.
- Targeted interventions for children and young people, offering in-home services and summer camps for pupils with academic or behavioral problems who are referred by teachers or parents.

The programme has been found to be effective in improving school bonding and achievement, reducing lifetime violence and heavy alcohol use at age 18; better emotional and mental health,

⁶ 90% of girls and young women agree that more should be done to address sexual violence in schools (Girlguiding 2015).

fewer with criminal records, fewer involved in selling drugs, and fewer pregnancies amongst under 21's. The long-term follow up of the programme showed that it was particularly effective for girls, who had significantly higher increases in pro-social skills than boys (Catalano et al, 2003 and Hawkins et al, 2008).

Example 2: In the UK **Tender's 'whole school' approach to challenging gender based violence and promoting healthy relationships** across 8 London secondary schools was evaluated as effective. The key ingredients that facilitated change were identified as:

The commitment of participating schools - particularly of school leaders – and the partnership working between Tender and school staff.

The quality of Tender's work – particularly their use of drama which was described as a way of promoting engagement, bringing life and energy to a topic, empathy with the experience of others and enabling self-expression.

The development of peer influence – with young people acting as peer educators and advocates of healthy relationships . Some schools created peer mentoring schemes, or peer led campaigns and advisory groups while others developed drama presentations or DVDs which students delivered in assemblies and to young people in other schools.

The 6 elements of Tender's 'whole school' approach:



Working in partnership with parent / carers

Parents / carers can be important partners in whole school-based prevention. Research suggests that most parents welcome prevention information provided in schools as it facilitates discussions on sensitive subjects at home (Topping and Barron 2009). A study by PACE (2015), however, found

that less than half of teachers would inform parents if they knew, or were concerned, about a child's involvement in CSE while three quarters of parents expected teachers to notify them. This highlights the need for better communication and cooperation between schools and parents in prevention work.

Local multi-agency partnerships and community involvement

Whole school approaches have the potential to identify **local issues** and involve the **local community** in prevention efforts. **Effective multi-agency partnerships** can play an important role in enhancing the success of prevention work in schools (Humphreys et al 2008). Whole school approaches should fit into wider community strategies, e.g. prevention work among health, voluntary sector, LSCB, police and youth service partners. A community approach, underpinned by effective multi-agency working, can enhance conditions and contribute to a school's 'readiness' to introduce interventions (Fox et al 2012).

Practically, partnership working can help get prevention work into schools and help reach those who are outside of mainstream education. Partnerships can provide important strategic knowledge and can support understanding of the local context.

PSHE

Another model of delivering CSE prevention as part a whole school approach is to integrate CSE prevention modules into **PSHE education**. There is evidence to suggest that life-skills, social-emotional learning and prevention programmes delivered through PSHE education can work, with most demonstrating significant, if generally small, effects (Hale et al 2011). Though PSHE is not statutory, it is endorsed by most schools with research suggesting that, on average, schools deliver an hour of PSHE education per week (Department for Children, Schools and Families 2009). In order to use this limited time effectively, MacDonald (2009) proposes a four-year PSHE curriculum (one hour per week) based on the five established PSHE content areas that include modules on Safety Education and Sex and Relationships Education. To enable schools to make the most of specific interventions focused on preventing CSE or sexual violence it is important that they complement/supplement the existing PSHE curriculum and avoid the 'fatigue' that can result from over-repetition.

WHAT DO THE MOST EFFECTIVE SCHOOL-BASED PROGRAMMES LOOK LIKE?

Addressing need: Tailoring interventions to specific contexts and target groups helps to get preventative messages across. This step is often missing when preventative work in schools is planned, but evidence suggests that a needs-analysis and a programme of work tailored to the young people to which it is delivered produces the best results (Humphreys et al 2008).

Age: Age appropriateness is crucial. However, only a few studies systematically explore what works for different age groups or which age groups interventions should target. Some reviews suggest that prevention work has the greatest benefits for children between 7 and 12 years, while others show

that older children learn prevention concepts more easily than younger children (Daro 1994; Topping and Barron 2009).

Gender: is a significant factor to be addressed in preventing and responding to sexual violence (Coy et al 2013). While 'gender-neutral' programmes are more easily marketed to the school system and more comfortable for teachers and students to accept' (Tutty and Bradshaw 2004), exploring the gendered nature of violence and the pressures to act in certain ways is an important part of addressing those attitudes and behaviours that sustain sexual violence and abusive relationships (Bell and Stanley 2006). However, prevention programmes should approach gender sensitively as some programmes have found lower levels of engagement from boys where materials were inappropriate or assumed boys had problematic attitudes (REaDAPt 2012). D'Arcy et al (2015) suggest that men as trainers can provide good role-models and increase acceptability particularly for boys.

Duration: Research suggests that longer-term interventions, e.g. as part of PSHE education, are likely to achieve better and more sustainable outcomes than one-off interventions (Gadd et al 2014). The REaDAPt project, which conducted a robust evaluation of three domestic violence prevention programmes⁷ in England, France and Spain found that interventions are most effective at changing attitudes if delivered over a number of weeks (REaDAPt 2012). Based on a meta-analysis of 27 diverse studies, Davis and Gidycz (2000) also found the highest impact for longer programmes. However, another meta-analysis of 18 studies found that brief programmes could also make an – albeit smaller – impact (Heidotting 1994). Young people themselves highlight the need **for refresher sessions every few years** to keep messages in mind (Barter and Berridge 2011).

Content: Research suggests that educational initiatives should take a strength-based approach that focusses on young people's capabilities: enabling them to make informed choices about their lives and relationships (Pearce 2009; D'Arcy et al 2015). Interventions should help children and young people to recognise inappropriate or unhealthy relationships, to identify trusted adults who they can talk to, and inform them about support services available (Pearce 2009). In doing so, interventions should reflect young people's realities, taking into account how young people socialise and communicate. A recent study on online abuse in Europe showed that, on average, children spend 86 minutes per day on the Internet (Davidson et al 2011). Programmes therefore need to address virtual forms of abuse and exploitation as well as online grooming, which plays a significant part in facilitating CSE (Davidson et al 2011; Smeaton 2013).⁸

⁷ *Relationships without Fear (RWF)* in England; *Filles et Garçons, en route pour l'Egalité* in France, and *La Máscara del Amor* in Spain

⁸ Current large scale school-based interventions on internet safety in the UK include the *Safer Surfing* Programme run by the Metropolitan Police and *ThinkUknow* programme run by the Child Exploitation and Online Protection Centre (CEOP) (Davidson et al 2011).

WHO SHOULD DELIVER PROGRAMMES?

Beckett et al (2013) recommend that prevention programmes should be delivered by **'credible individuals'**. Other research suggests that a **collaboration between teachers, and external trainers and children and young people** is a beneficial way of delivering interventions (Fox et al 2014).

Teachers

Teachers are well placed to embed preventive messages in their teaching due to their consistent, long-term relationships with pupils. However, teachers often contend with competing priorities arising from curriculum demands (Baginsky and Macpherson 2005). They may lack specialist knowledge or the confidence to deliver sexual violence prevention programmes without specific training (Pearce 2013; Fox et al 2012). Some teachers feel awkward delivering sexual violence prevention programmes to their own classes and suggest that pupils may be more receptive to external facilitators.

External facilitators

Specialist workers are very experienced in and comfortable with the subject matter and some pupils may feel more able to discuss issues and ask questions of 'outsiders'. The evaluation of Rape Crisis Scotland's Sexual Violence Prevention Projects showed that the delivery of high quality workshops by independent experts was crucial in achieving positive impacts; 92% of students felt included in the sessions and they highlighted the importance of workshop leaders being independent from schools, approachable and knowledgeable (McNeish and Scott 2015).

Peers

While young people are not conclusively perceived as more effective than adult trainers (Weisz and Black 2006), engaging young people can add **credibility, authenticity**, and increase the **acceptability** of prevention interventions (Firmin and Shuker 2016). Successful interventions rely on giving messages that are recognisable and meaningful to children and young people and that make it 'real' (Beckett et al 2013). Young people can reach peers by speaking the same language. A scoping review on domestic violence prevention programmes highlights this as **key for achieving impact** (Stanley et al 2015). However, some schools report that the 'quality' of programme delivery diminished through young people's participation while other schools found that young people's performances exceeded teachers' expectations (Weisz and Black 2010).

Although some research highlights peer involvement as cost-effective, participation work can also be very resource-intensive. If young people are to deliver prevention programmes, they too require quality training and high levels of support (Stanley et al 2015).

WHAT METHODS ARE EFFECTIVE IN WORKING WITH CHILDREN AND YOUNG PEOPLE?

Research suggests that teaching 'theory' alone has limited impact. A survey conducted by 'Girlguiding' (2013) found that, while participants understood issues in theory, the understanding quickly broke down when learning was applied to real scenarios. Theoretical knowledge should therefore be complemented and reinforced with opportunities for young people to **practice skills** and **apply learning** to real life scenarios, e.g. through drama/role play. This promises more sustainable changes in attitudes and behaviours (Fox et al 2014).

The range of methods that can be used

Effective programmes incorporate a **range of creative methods**, including modelling, group discussion, role-play and visual DVDs. Use of 'vignettes' or 'what if scenarios' are found to work better if children and young people are actively engaged (Topping and Barron 2009). Bell and Stanley (2006) note that physical activities, like drama, worked particularly well for engaging boys while girls appeared to enjoy discussions more. The evaluation of *Tender*, the biggest provider of drama-based sexual violence prevention work in the UK, highlighted that teachers universally found that drama helped pupils to really explore difficult issues of abuse, violence and power in personal relationships (McNeish and Scott 2012).

Research highlights that **flexibility** in delivering programmes and the acknowledgement of **different learning styles** is crucial (Fox et al 2012). Findings from *Relationships Without Fear (RWF)* acknowledged:

- The need for varied activities, active participation and flexibility; there is no 'one size fits all' approach so methodologies need to consider different learning styles.
- The challenge of balancing free debate and differences in opinion – including the expression of harmful attitudes - while protecting young people who may have experienced abuse.
- The need to managing student discomfort; role play works for some young people but may make others feel uncomfortable and may trigger traumatic experiences.
- Applying sensitivity to a gendered approach; and recognising that gendered perspectives on sexual violence may alienate some young people.
- Recognising the limitations of raised awareness; including the evidence that some young people take mixed messages from prevention programmes and have particular difficulties in recognising issues around 'power' and 'control'.

Mentoring

Mentoring, in various forms (peer mentoring, group mentoring, adult to youth mentoring, etc) and contexts (communities, schools, etc) is widely used as a **targeted intervention for high risk young people**, including those engaged in, or at high risk of, gang-involvement and youth violence

(O'Connor and Waddell 2015). Mentoring has shown promising impact on reoffending, anti-social or criminal behaviour and associated problems (Jolliffe and Farrington 2007). One of the best evaluated programmes is Big Brothers Big Sisters of America: a community mentoring programme, which matches a volunteer adult mentor to a child, with the expectation that a caring and supportive relationship will develop. Evaluations have reported positive outcomes including reduced take-up of drug and alcohol use and reductions in truancy particularly for girls (Baldwin and Tierney, 1998).

A systematic review of mentoring showed that programmes that had emotional support as a key component were more effective. Mentors that were motivated to participate in interventions as part of their own professional development were furthermore found to achieve better outcomes than volunteers, particularly on improving youth delinquency and aggression (Tolan et al 2008).

However, recent guidance by the Early Intervention Foundation (EIF) suggests that, whilst mentoring delivered in the right way to the right young people can have positive impacts, it can also have non-significant or harmful effects (O'Connor and Waddell 2015). These 'harmful effects' are largely attributed to lack of adequate training and support of mentors, and not reviewing the impact on young people's understanding of key messages.

There is little evidence about the use of mentoring specifically for CSE affected or at risk young people. Mentors providing support for exploited young women in one secure unit, and through their transition back into the community, were regarded very positively by the young women (Scott, 2016).

HOW SHOULD INTERVENTIONS ADDRESS DIVERSITY?

There is little evidence about how sexual violence interventions in the UK accommodate diversity or pay attention to issues of race, ethnicity, class, sexuality or disability. However, the need for additional resources aimed at disabled children, children from black and minority ethnic groups, refugee and asylum-seeking children, as well as LGBT and transgender children and young people has been highlighted (Stanley et al 2015). Here we consider just two issues for which some limited evidence is available.

Socio-economic factors

In Topping and Barron's meta-analysis of child sexual abuse prevention programmes, only two out of 22 studies analysed their data by socio-economic status (2009). Those two studies showed poorer outcomes for children from lower socio-economic backgrounds. This difference was still apparent at a 12-months follow up. Specifically, children from disadvantaged backgrounds made fewer gains compared to children from middle-income families in relation to:

- Rejecting inappropriate touching and reporting inappropriate behaviour without being punished.
- Trusting parents to stop unwanted touching.

- Expecting to be believed by adults.
- Experiencing emotional safety.
- Improved self-esteem.

While children with low socio-economic status started from a lower baseline, children from middle-class homes with active parental involvement and teachers who integrated safety knowledge into their teaching made the most progress (Topping and Barron 2009).

Children and young people with learning difficulties

Research suggests that children and young people with learning disabilities are more vulnerable to CSE and face additional barriers to their protection and to receiving support (Franklin et al 2015). However, there is limited awareness that young people with learning disabilities are sexually exploited. Research shows that:

- Young people with learning disabilities are vulnerable to CSE due to factors that include overprotection, social isolation and society refusing to view them as sexual beings
- Lack of awareness of the sexual exploitation of young people with learning disabilities among professionals also contributes to their vulnerability
- There are gaps in national policy and a lack of implementation of current guidance
- Young people with learning disabilities are often not specifically considered in local multi-agency arrangements for CSE, which has implications for whether those experiencing or at risk of CSE are identified or receive support
- Young people with learning disabilities can face a number of challenges to disclosing CSE, including the negative responses of professionals (BILD 2015)

To prevent young people with learning disabilities from experiencing, or being at risk of CSE, and to improve support, research with young people identified four key areas where improvements could be made:

- Education and information on sex and relationships and exploitation
- Earlier, child-centred general support for young people so that issues do not escalate and create risk; this includes being listened to by professionals
- Support to meet their specific learning needs
- Access to more specialist CSE services

IMPLICATIONS FOR THE DEVELOPMENT OF CSE PREVENTION WORK IN EDUCATIONAL SETTINGS

So what does all this mean for the development of effective prevention work? It means that changing young people's actual behaviour through preventative education is extremely difficult and even well-designed and delivered, intensive programmes have been shown to have very limited effects. Claims and ambitions for such interventions should therefore be cautious.

However, programmes can hope to have positive impacts on young people's knowledge and attitudes if they take into account the following messages from research and evaluation:

- Schools need to be engaged and committed. They need to see the issues as important to them and be prepared to invest time and resources themselves (not just welcome a freebie!).
- Short-term interventions that are temporary and 'stand-alone' (as opposed to being integrated into ongoing curricula) are unlikely to be effective on their own. Therefore, working with school leaders to consider how best to integrate an intervention with other aspects of school policy and practice and dovetailing messages with the PHSE curriculum is likely to be time well spent.
- A fully integrated 'whole school' approach should include the active involvement of children and young people, staff, parents and the wider community.
- It is important to undertake a needs-assessment in collaboration with school partners and tailor interventions to the specific audience and context.
- Any intervention needs to be substantial enough to have an impact - with a duration sustained over a number of regular sessions and a plan for follow-up sessions.
- Content needs to challenge attitudes around gender and relationships that underpin harmful behaviour, but needs to do so in ways which do not alienate boys.
- Facilitators need to be credible and have a delivery style that is confident, open and appeals to children and young people.
- A variety of active methods that allow for different learning styles, maximise young people's engagement, bring life and energy to a topic, encourage empathy with the experience of others and enable self-expression should be incorporated.

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